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Selective Arterial Embolization in the Treatment of High Flow Priapism: Report of 5 Cases

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Abstract:

High flow priapism is a rare entity caused by a pathologic influx from lacerated arteries to the cavernous bodies. Transcatheter embolization of feeding arteries is the treatment of choice. We reviewed a series of 5 patients who un derwent transcatheter embolization in our hospital from 2000 to 2004. The mean age of patients was 32 years; dur ation of priapism was between one week and a year. All underwent bilateral pudendal artery ca theterization with No.5 French Cobra-II catheters. We did not microcatheters in our patients. Embolized materials were gel-foam, coils and polyvinyl alcohol microspheres. We could follow four of them for 6 to 40 months; one of the patients dropped out from our follow-up study. All the four patients had completed detumescence after a maximum of two days from embolization; none of them experienced signific ant complications and all returned to normal sexual function and remained symptom free thereafter (6-40 months). We noted no difference in complications and duration to restore erectile function and less recurrence rate with embolization of main br anch of pudendal artery instead of superselective embolization of arteriocavernous fistul a feeder artery with a microcatheter that is the method of choice for the treatment of high flow priapism, but due to small number of cases it needs further studies to be confirmed.

Keywords:

high flow priapism , pudendal artery embolization

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